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Attorney Docket No.: 00939B-068710US Client Ref. No.: 99-OPH-1750/CIP/EYL

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Alexandria, VA 22313-1450

By: Personal Personal

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Jae Chang JUNG et al.

Application No.: 10/080,507

Filed: February 22, 2002

For: CROSS-LINKING MONOMERS FOR PHOTORESIST, AND PROCESS FOR PREPARING PHOTORESIST POLYMERS USING THE SAME

Customer No.: 20350

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed August 19, 2005, please enter the following amendments and remarks:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 5 of this paper.

Remarks/Arguments begin on page 12 of this paper.

Confirmation No. 1185

Examiner:

Sin J. Lee

Technology Center/Art Unit: 1752

AMENDMENT ACCOMPANYING RCE

								
For auroung to the	Effective on 12/0	18/2004.	2005 (U.D. 4848)	Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nun	nber 10/080,	10/080,507		
FEE TRANSMITTAL			Filing Date	Februar	February 22, 2002			
•	For FY	2005	/0	First Named Inv		Jae Chang		
Applicant claims small entity status. See 37 CFR 127 1 0 20				Elaminer Name	1	ее .		
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				Axe/ney Docke	No. 00939B	-068710US		
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Deposit Acc	ount Deposit Ac	count Numb	er: 20-1430	Deposit Acco	unt Name: Townse	end and Townser	nd and Crew LLP	
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Char	ge any additional r 37 CFR 1.16 and	fee(s) or un d 1 17	derpayments of fe	e(s) X Cred	it any overpayme	nts		
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FEE CALCULAT								
1. BASIC FILING	3, SEARCH, AN	ID EXAMI	NATION FEES	 				
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Plant	200	100	300	0 150	160	80 80		
Reissue	300	150	500	250	600 3	00		
Provisional	200	100	` (0 0	0	0		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Each independent claims Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$)								
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3. APPLICATION If the specification for each add Total Sheets	on and drawing itional 50 sheet	s or fractio	on thereof. See : Number of e	35 U.S.C. 41(a) ach additional 5	tion size fee due (1)(G) and 37 C D or fraction then whole number)	CFR 1.16(s). eof <u>Fee (\$)</u>	for small entity) Fee Paid (\$) -	
4. OTHER FEE(S	i)	•			,		Fees Paid (\$)	
RCE							790	
Other: Terminal Disclaimer							130	
SUBMITTED BY								
Signature	Mark	Nech	Vheno.	Registration No. (Attorney/Agent)	26,201	Telephone	303-571-4000	
Name (Print/Type)	Mart C. Matth	ews				Date Nove	mber 10, 2005	